

Standard Form No. 1034—Revised
Form prescribed by
Comptroller General, U. S.
September 7, 1950 **Approved**
(Gen. Reg. No. 51, Supp. No. 11)
(Amended February 20, 1952)

**PUBLIC VOUCHER FOR PURCHASES AT
SERVICES OTHER THAN PERSONAL.**

D. O. Vou. No. -----
0600040116-4
Bu. Vou. No. -----

U. S. _____
(Department, bureau, or establishment)

Voucher prepared at _____
(Give place and date)

THE UNITED STATES, Dr., *Payee's Account No.* _____

To _____ Thompson Ramo Wooldridge Inc.
(Payee)

Page 1 of

PAID BY

(Address)		(City)	(State)	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)			
No. and Date of Order	Date of Delivery or Service	Discount Terms	Invoice No.	QUANTITY	UNIT PRICE		AMOUNT
					Cost	Per	Dollars Cts.
			2343				178 60
			2344				466 97
			2345				10,527 29
			2346				1,064 08
			2347				2,846 36
			2348				4,768 67
			2349				29 86
PAYMENT:	Complete <input type="checkbox"/>	Approved For Release 2001/08/15 : CIA-35DP64-00360R000600040116-4	2351				2 76
Partial <input type="checkbox"/>							1,229 16
Final <input type="checkbox"/>							
Use continuation sheet(s) if necessary				continued			

PAYMENT.

Complete

Partial

Final

Approved For Release 2001/08/15 : CIA ²³ 30P64-00360R000600040116-4

2351

continued

Use continuation sheet(s) if necessary.

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D. O. Vou. No. _____
Approved For Release 2001/08/15 : CIA-RDP64-U0360R000600040116-4
Bu. Vou. No. _____

U. S. _____
(Department, bureau, or establishment)

Page 2 of

PAID BY

Voucher prepared at : _____
(Give place and date)

THE UNITED STATES, Dr.,
Payee's Account No. _____

To _____
Thompson Ramo Wooldridge Inc.
(Payee)

Los Angeles 45, California

(Address) (City) (State)

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUANTITY	UNIT PRICE		AMOUNT			
				Discount Terms	Invoice No.	Cost	Per	Dollars	Cts.
		2352						24,572	43
		2353						79	16
		2354						7,647	91
		2355						2,110	66
		2356						10,612	29
		2357						283	84
		2358						4,218	31
		2360						197	38
PAYMENT:								2,799	81
Complete	<input type="checkbox"/>	Approved For Release 2001/08/15 : CIA-RDP64-U0360R000600040116-4							
Partial	<input type="checkbox"/>								
Final	<input type="checkbox"/>								

Use continuation sheet(s) if necessary

continued

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Form proscribed by
Comptroller General U. S.
September 7, 1952
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BLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL

D. O. Vou. No. _____
Bu. Vou. No. _____

U. S. _____

(Department, bureau, or establishment)

Voucher prepared at _____

(Give place and date)

THE UNITED STATES, Dr.,

Payee's Account No. _____

To _____

Thompson Ramo Wooldridge Inc.

(Payee)

Los Angeles, California

(Address) (City) (State)

No. and Date of Order	Date of Delivery or Service	(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) Discount Terms	ARTICLES OR SERVICES Invoice No.	QUANTITY	UNIT PRICE		AMOUNT	
					Cost	Per	Dollars	Cts.
			2361				686	13
			2362				5,361	52
			2363				434	51
			2364				6,079	50
			2401				239	35
			2402				4,213	92
			2403				58	10
			2404				2,953	24

PAYMENT:

Complete
Partial
Final

Use continuation sheet(s) if necessary

Shipped from _____ to _____ Weight _____ Government B/L No. _____ Total **93,661 61**

I certify that the above bill is correct and just and that payment has not been received.

(Payee must NOT use this space)

(Sign original only)

Differences _____

STATINTL

Date _____ *Payee _____

(This certificate not required when a like certificate is made by payee on attached bill or bills)

Amount verified; correct for _____

93,661 61

(Signature or initials)

Per _____ Title _____

Contract No. **A-101**

Date _____

Req. No. _____

Date _____

Invoice Rec'd. _____

Pursuant to authority vested in me, I certify that this account is correct and proper for p _____

STATINTL

† Approved for \$ _____

SIGN
ORIGINAL
ONLY

By _____

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Paid by { Check No. _____ dated _____, 19_____, for \$_____ on Treasurer of the United States in
Cash, \$_____, on _____, 19_____, Payee _____ favor of payee named above.

(Sign original only)

* When a voucher is signed or receipted in the name of a company or corporation, the name of the person signing it must be written on the company or corporation name, e.g., "John Doe Company, by John Smith, Secretary", or "Treasurer", as the case may be.

† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$_____, and over his official title."

Title _____

16-22900-5